CHECK REQUISITION

Payable to:
(include all information to
be typed on the face of
check)

MAIL STOP PATENT APPLICATION

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Date: August 9, 2004

Amount: $105.00

Client Name: Wideband Access, Inc.

DESCRIPTION (to be typed on check stub)	ACCOUNT #	CLIENT/MATTER #	$ AMOUNT
Surcharge for late filing of declaration and assignment recordation fee.		45389.00011.CIP1. P1068	$105.00

Check Requested: (please check one)

☐ Today by   (Time)

☐ On or Before   (Date)

☐ Other   (Date)

Requested by: Noel C. Gillespie

Approved by responsible Attorney/Legal Assistant/Administrator:

When check is completed: (please check one)

☐ Mail Check

☐ Mail Check with Attached Form(s)

☐ Return Check to: Office: San Diego

☐ Call When Ready: Ext.:

SAN /96040.1